



VERMONT

AGENCY OF HUMAN SERVICES

DEPARTMENT OF DISABILITIES, AGING AND INDEPENDENT LIVING

Division of Licensing and Protection

HC 2 South, 280 State Drive
Waterbury, VT 05671-2060
<http://www.dail.vermont.gov>

Survey and Certification Voice/TTY (802) 241-0480

Survey and Certification Fax (802) 241-0343

Survey and Certification Reporting Line: (888) 700-5330

To Report Adult Abuse: (800) 564-1612

March 20, 2018

Ms.. Peggy Degoosh Hitchener, Manager
Frances Atkinson Residence For The Retired
4717 Main Street
Newbury, VT 05051

Dear Ms.. Degoosh Hitchener:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **March 7, 2018**. Please post this document in a prominent place in your facility.

We may follow-up to verify that substantial compliance has been achieved and maintained. If we find that your facility has failed to achieve or maintain substantial compliance, remedies may be imposed.

Sincerely,

A handwritten signature in black ink that reads "Pamela M. Cota, RN".

Pamela M. Cota, RN
Licensing Chief



MAR 20 2018

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0004	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 03/07/2018
NAME OF PROVIDER OR SUPPLIER FRANCES ATKINSON RESIDENCE FOR THE R		STREET ADDRESS, CITY, STATE, ZIP CODE 4717 MAIN STREET NEWBURY, VT 05051	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) (X5) COMPLETE DATE
R100	Initial Comments: An unannounced onsite complaint investigation was completed by the Division of Licensing and Protection on 3/7/18. The following regulatory violations were identified:	R100	Medication Management Deficiency was corrected 3-8-18 (Cathy LeOne) RN RN completed admission assessment, reviewed medication orders from the physician and watched unlicensed staff administer the medication to this resident.
R163	V. RESIDENT CARE AND HOME SERVICES SS=D 5.5 Medication Management 5.10.d If a resident requires medication administration, unlicensed staff may administer medications under the following conditions: (1) A registered nurse must conduct an assessment consistent with the physician's diagnosis and orders of the resident's care needs as required in section 5.7.c This REQUIREMENT is not met as evidenced by: Based on record review and staff interview, the facility failed to ensure that a Registered Nurse (RN) conducted an assessment of 1 of 5 residents in the applicable sample (Resident #4) prior to administration of medications by unlicensed staff. Findings include: During interview with the home's manager on 3/7/18 at approximately 9:20 AM, it was confirmed that the facility had not had an RN on staff for at least one week. It was further confirmed that during that period, Resident #4, who required medication management, had been admitted to the home (3/2/18). There was no evidence that an RN had assessed Resident #4 prior to medications being administered by the unlicensed staff on 3/2-7/18.	R163	3-9-18 Residence's Director met with Staffing Solution's Director to ensure a RN would be in place at the time of admissions. Residence's Director interviewed a RN (Betty Stewart) on 3-12-18 Position was offered and accepted 3-13-18 3-14-18 Staffing solution consult RN stated above is working with new hired Residence's RN to ensure a successful transition. Residence Director will meet with Consult (RN) & Residence (RN)

Division of Licensing and Protection

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

STATE FORM

TITLE

(X6) DATE

Peggy DeMars Hitchcock Director 3-14-18

6899

XWGC11

If continuation sheet 1 of 3

R163-R164 POC's accepted 3/19/18 JHesmer/RH/PML

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R164	Continued From page 1 R164 V. RESIDENT CARE AND HOME SERVICES SS=D 5.10 Medication Management 5.10.d If a resident requires medication administration, unlicensed staff may administer medications under the following conditions: (2) A registered nurse must delegate the responsibility for the administration of specific medications to designated staff for designated residents This REQUIREMENT is not met as evidenced by: Based on record review and staff interview, the facility failed to ensure that a Registered Nurse (RN) delegated the responsibility for administration of specific medications to designated staff for 1 of 5 designated residents in the applicable sample (Resident #4). Findings include: During interview with the home's manager on 3/7/18 at approximately 9:20 AM, it was confirmed that the facility had not had an RN on staff for at least one week. It was further confirmed that during that period, Resident #4, who required medication management, had been admitted to the home (3/2/18). There was no evidence that an RN had assessed Resident #4 and delegated specific medications for a specific resident (Resident #4) prior to medications being administered by the unlicensed staff from 3/2-7/18. The Medication Administration Record contained documentation of medications given as ordered by the physician during the period 3/2-7/18.	R164 R164	To ensure the transition is completed to all parties satisfaction and all state regulations have been met. Residence's Director will meet with RN weekly to assess the needs of the residents. Director will access the assistance of staffing solutions RN consult if additional education is required Corrective Action of this Medication management deficiency was completed 3-14-18	

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